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Effective on 12/08/2004. <i>Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).</i>		Complete if Known	
FEE TRANSMITTAL		Application Number	10/538,079-Conf. #7194
For FY 2009		Filing Date	June 9, 2005
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		First Named Inventor	Koji MATSUMOTO
TOTAL AMOUNT OF PAYMENT (\$ 1,430.00)		Examiner Name	M. G. Miller
		Art Unit	1792
		Attorney Docket No.	0020-5381PUS1

METHOD OF PAYMENT (check all that apply)					
<input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____					
<input checked="" type="checkbox"/> Deposit Account Deposit Account Number: 02-2448		Deposit Account Name: Birch, Stewart, Kolasch & Birch, LLP			
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)					
<input checked="" type="checkbox"/> Charge fee(s) indicated below			<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee		
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17			<input checked="" type="checkbox"/> Credit any overpayments		

FEE CALCULATION																	
1. BASIC FILING, SEARCH, AND EXAMINATION FEES																	
Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES												
	Fee (\$)	Small Entity	Fee (\$)	Small Entity	Fee (\$)	Small Entity	Fees Paid (\$)										
	Utility	330	165	540	270	220	110	_____									
	Design	220	110	100	50	140	70	_____									
	Plant	220	110	330	165	170	85	_____									
	Reissue	330	165	540	270	650	325	_____									
Provisional	220	110	0	0	0	0	_____										
2. EXCESS CLAIM FEES																	
Fee Description																	
Each claim over 20 (including Reissues) Fee (\$) Small Entity 52 26																	
Each independent claim over 3 (including Reissues) Fee (\$) Small Entity 220 110																	
Multiple dependent claims Fee (\$) Small Entity 390 195																	
<table border="0"> <tr> <td style="text-align: center;">Total Claims</td> <td style="text-align: center;">Extra Claims</td> <td style="text-align: center;">Fee (\$)</td> <td style="text-align: center;">Fee Paid (\$)</td> <td style="text-align: center;">Multiple Dependent Claims</td> </tr> <tr> <td>12</td> <td>- or HP =</td> <td>x =</td> <td>_____</td> <td>Fee (\$) Fee Paid (\$)</td> </tr> </table>								Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims	12	- or HP =	x =	_____	Fee (\$) Fee Paid (\$)
Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims													
12	- or HP =	x =	_____	Fee (\$) Fee Paid (\$)													
HP = highest number of total claims paid for, if greater than 20. _____																	
<table border="0"> <tr> <td style="text-align: center;">Indep. Claims</td> <td style="text-align: center;">Extra Claims</td> <td style="text-align: center;">Fee (\$)</td> <td style="text-align: center;">Fee Paid (\$)</td> </tr> <tr> <td>1</td> <td>- or HP =</td> <td>x =</td> <td>_____</td> </tr> </table>								Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	1	- or HP =	x =	_____		
Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)														
1	- or HP =	x =	_____														
HP = highest number of independent claims paid for, if greater than 3. _____																	
3. APPLICATION SIZE FEE																	
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(c)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).																	
<table border="0"> <tr> <td style="text-align: center;">Total Sheets</td> <td style="text-align: center;">Extra Sheets</td> <td style="text-align: center;">Number of each additional 50 or fraction thereof</td> <td style="text-align: center;">Fee (\$)</td> <td style="text-align: center;">Fee Paid (\$)</td> </tr> <tr> <td>- 100 =</td> <td>/50 =</td> <td>(round up to a whole number) x =</td> <td>_____</td> <td>_____</td> </tr> </table>								Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)	- 100 =	/50 =	(round up to a whole number) x =	_____	_____
Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)													
- 100 =	/50 =	(round up to a whole number) x =	_____	_____													
4. OTHER FEE(S)																	
Non-English Specification, \$130 fee (no small entity discount) Fee (\$) Fee Paid (\$) 810.00																	
Other (e.g., late filing surcharge): 1801 Request for continued examination (RCE) (see 37 ... Fee (\$) Fee Paid (\$) 130.00																	
1808 Processing fee, except in provisional applications Fee (\$) Fee Paid (\$) 490.00																	
1252 Extension for response within second month Fee (\$) Fee Paid (\$) _____																	

SUBMITTED BY		<i>John W. Bailey</i>	
Signature		Registration No. (Attorney/Agent)	32,881
Name (Print/Type)	John W. Bailey	Telephone	(703) 205-8000
		Date	March 5, 2009